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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	
First Inventor	James E. Muschetto

"METHOD AND APPARATUS FOR ACCESSING

Title INFORMATION, COMPUTER PROGRAMS AND ELECTRON

Expre COMMUNICATIONS ACROSS MULTIPLE COMPUTING

DEVICES LISING A GRAPHICAL USER INTERFACE"

APPLICAT	TION ELEMENTS		RESS TO: Box F	Patent App		
See MPEP chapter 600 conce	eming utility patent application contents.	,,,,,		nington, D		
See MPEP chapter 600 conce 1.	eming utility patent application contents. rm (e.g., PTO/SB/17) uplicate for fee processing) nall entity status. [Total Pages 57] set forth below) of the invention to Related Applications rding Fed sponsored R & D quence listing, a table, rogram listing appendix the Invention of the Invention of the Drawings (if filed) ption Disclosure	7 8. Nuc (if a a b. \$		duplicate, Appendix) id Sequence Form (Calisting on CD-R (2alisting on CD-R (2alisting on CD-R (2alisting on CD-R (2alisting on Cover should be covered on the covered of the covered of covered on the covered of covered on the covered of covered on the covered o	large ince Suite S	table or bimission by; or pve copies N PARTS document(s)) Power of Attorney pplicable) Copies of IDS Citations 03) ht(s) U.S.C. 122
or in an Application Data She Continuation Prior application information: For CONTINUATION OR DIVISI	CATION, check appropriate box, and subset under 37 CFR 1.76: Divisional Continuation-in-part (CIPExaminer: ONAL APPS only: The entire disclosure of the disclosure of the accompanying controlled upon when a portion has been inadving. CORRESPON	the prior app inuation or divertently omiti	of prior application No.: Group Art Unit: lication, from which an oa visional application and is ted from the submitted ap	ith or deci	aration	is supplied under
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Customer Number or Bar Co	ode Label (Insert Customer No. or Attach	ber coop (poel h	or	Correspon	uerice 80	idress below
Name	James E. Muschetto					
	5477 Ventana Place					
Address						
City	Citrus Heights	State	CA	Zip (Code	95610
Country	USA 7	elephone	916-961-3936	Fé	X	
Nome (Brint/Tune)	Names E. Muschetto	Red	istration No. (Attorne)	//Aaent)		
Name (Print/Type)	1	1	,	Date		8/2002
Signature	Interest Or Many Volume			Laic	I ~ ~~, .	

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

\$)	370.00
₹/	

Complete if Known		
Application Number		
Filing Date		
First Named Inventor	James E. Muschetto	
Examiner Name		
Group Art Unit		
Attorney Docket No.		

METHOD OF PAYMENT	METHOD OF PAYMENT FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to: Deposit	Large Small			
Account	Entity Entity Fee Fee Fee Fee Description F	Fee Paid		
Number	Code (\$) Code (\$)			
Deposit Account	105 130 205 65 Surcharge - late filing fee or oath			
Name Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
	139 130 139 130 Non-English specification			
Applicant claims small entity status. See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination			
2. Payment Enclosed: Check Credit card Money Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
1. BASIC FILING FEE Large Entity Small Entity	116 400 216 200 Extension for reply within second month			
Fee Fee Fee Fee Description	117 920 217 460 Extension for reply within third month			
Code (\$) Code (\$) Fee Paid 101 740 201 370 Utility filing fee 370.00	118 1,440 218 720 Extension for reply within fourth month			
106 330 206 165 Design filling fee	128 1,960 228 980 Extension for reply within fifth month			
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal			
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal			
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing			
	138 1,510 138 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 370.00	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional			
Extra Claims Fee from Fee Paid				
Total Claims -20** = X =	143 460 243 230 Design issue fee			
Independent - 3** = X = =	144 620 244 310 Plant issue fee			
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner			
	123 50 123 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection			
104 280 204 140 Multiple dependent claim, if not paid	(37 ČFR § 1.129(a)) 149 740 249 370 For each additional invention to be			
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 0.00	Other fee (specify)	.00		
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0	.00		

SUBMITTED BY Complete (If applica.			f applicable)	
Name (Print/Type)	James E. Museketto	Registration No. (Attorney/Agent)	Telephone	916-961-3936
Signature	Jan J. Sun		Date	02/18/2002

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James Muschetto 5477 Ventana Place Citrus Heights, CA

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95610

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V TO USE:



 COMPLETE ADDRESS LABEL AREA Type or print required return address and addressee information in customer block (white area) or on label (if provided).

2. PAYMENT METHOD

Affix postage or meter strip to area indicated in upper right hand comer

3. ATTACH LABEL (If provided)

Remove label backing and adress over customer address blove area?

